

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Dr. Siddiq  
Bullock County Correctional Fac  
PO Box 5107  
Union Springs, AL 36089-5107

06cv1115

2. Article Number  
(Transfer from service label)

PS Form 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

x *Carey Culver*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*Carey Culver*

C. Date of Delivery

*12/21/06*

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7005 1160 0001 2962 0556

Domestic Return Receipt

102595-02-M-154n